



Office of Child Care  
& Head Start

# *Early Care and Education Strategic Planning in Maine*

## **A Summary of Current Activities**

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*Early Care and  
Education  
Strategic Planning  
in Maine*

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# *Introduction & Summary*

Many public and private organizations in the State of Maine are concerned about early care and education and have engaged in planning and research to strengthen the system. This report represents an effort to summarize the results of these plans in a single document. Information was obtained by reading all relevant reports and, where necessary, conducting interviews with key informants from relevant agencies.

While multiple planning efforts have occurred, in most cases those efforts do not appear to be duplicative. Organizations tended to address a particular sector or “slice” of the issue. However, in the course of preparing this summary it became clear that there has been a lack of coordination among the planning efforts and a failure to utilize prior planning to build a system of early care and education. It is hoped that this report will begin a new process of collaborative planning, and help to fill gaps in information.

## ***Common Themes***

Several key themes emerged, time and again, in the early childhood planning initiatives summarized for this report. These include the following:

### ► ***Maine Needs to Focus on Cross-system Planning and Implementation***

There appears to be fairly consistent agreement that early childhood services cross multiple systems and that the State needs a clear plan for how that work can be coordinated. At the heart of this issue are common, cross-system: standards, outcome measures and data collection strategies, support systems, eligibility levels and administrative/fiscal policies.

*Standards* - Several of the planning efforts recommended early childhood program accreditation as a desired standard, and Maine has made accreditation one of the benchmarks for “Certified Quality Child Care” designation.<sup>1</sup> However, quite a few planning efforts suggested or implied that early care and education program and practitioner standards be established at multiple levels and with varying points of entry. This might include a “star” quality rating system programs, and a credentialing system for practitioners, that would apply to early childhood services in all domains. Guidance on developing these systems could grow from

<sup>1</sup> Maine doubles the state dependent care tax credit for parents who use “certified quality child care providers”. Certified providers include those that: have current accreditation by one of the following agencies: NAEYC, NAFCC, NSACA; or, meet the Head Start performance Standards for Programs of Excellence or Quality; or, a family child care provider with a CDA or an AA, Bachelors, Masters, or PhD in ECE, child development, or related degree. (Providers with a related degree need at least 12 credits in Early Childhood Education. Providers with degrees will also need to complete a 3 credit course or 45 hours of Core Knowledge training every 3 years.) In 2003, approximately 266 programs had quality certificates. For more information go to: <http://www.state.me.us/dhs/taxcredits.htm#Dependent> or <http://www.state.me.us/revenue/incomeestate/homepage.html>

work completed by the Credentialing Task Force (pg 20), the Early Childhood Learning Results Task Force (pg 10) and the Maine Roads to Quality Professional Development system (pg 17). These efforts appear to have engaged practitioners and stakeholders from multiple systems, although increased involvement from K-12 and Higher Education may be needed in future work.

*Outcome Measures* - Maine has engaged in several initiatives aimed at establishing early childhood outcomes and indicators. The recommendations of each effort are summarized in this report on pages 10-16. Future efforts could focus on reviewing and aligning the various initiatives so that a common set of outcome measures can be established and used to measure the impact of early childhood services in multiple domains.

*Support for Practitioners* (professional development) - The need to build and nurture a well-qualified early childhood workforce was a theme that resonated throughout the planning efforts described in this report. Recommendations were fairly consistent, and focused on increased training and education, credentialing, financial support for obtaining advanced training and education, and increased compensation linked to increased training. This work is summarized on pages 17-20.

*Support for Programs* (technical assistance) - While many planning efforts addressed supports for practitioners, support systems for early childhood programs were rarely mentioned. The Maine Roads to Quality (MRTQ) Advisory Board 2003-2004 Work Plan and the ACCESS Blueprint both mentioned the need for program technical assistance and supports. ACCESS did not recommend specific strategies. MRTQ focused on increasing the number of accredited early

childhood programs. The Business Commission report, the Economic Impact of the Child Care Industry report, and the Market Rate and Workforce study all recommended that a facilities fund be established. The Business Commission also suggested exploring ways to help early childhood programs reach some economies of scale. A more thorough look at what program supports are currently available in the State and what approaches could most effectively help programs meet and maintain quality standards might be a helpful next step.<sup>2</sup>

*Administrative/Fiscal Policies* - The Maine Children's Alliance planning effort recommends that the State develop a single point of entry for families that seek assistance from the state and reduce the need for multiple assessments, treatment plans and case managers. This will require common (or coordinated) policies regarding eligibility determination, service delivery, and other case management issues. The ACCESS Blueprint appears to echo this sentiment. The Task Force on Early Childhood developed a plan for coordinated family support services.

## ► ***A Financing Plan Should be Developed***

The need to adequately fund children's services in general, and the early care and education system in particular, was noted by almost all of the planning efforts. The Child Care Advisory Council and the Task Force on Early Childhood recommend increased funding (or at least level funding in years of budget cuts), and most others suggest that expanded funding is needed and recommend that a committee or Task Force be established to develop a financing plan.

<sup>2</sup> MRTQ currently provides technical assistance to early childhood programs, and starting in January 2004, they will conduct environmental assessments (using ECERS, ITERS and FDCRS) and then use the results to help determine the type and frequency of on-site services provided to programs.

Only a few of the planning efforts included specifics regarding how increased funds could be secured. ACCESS, the Maine Children's Alliance and the Economic Impact of the Child Care Industry study all suggest that the state strengthen its capacity to manage and leverage federal funds for children's services. The reports also encourage the State to restructure administrative systems so that the subsidy system is seamless and easily accessible for families. The Market Rate and Workforce study, the Economic Impact study and the Business Commission report all recommend increasing financial contributions from employers through information and targeted tax policy

### ► ***Consumers – and the Public at Large – Need to be Engaged***

Nearly every plan noted the importance of increasing parent and public awareness around the importance of early care and education and what constitutes quality. Many plans recommended public awareness campaigns using various media outlets. Others were more specific and suggested strategies such as instituting a quality rating system (count the stars) for early childhood programs (Infant/Toddler Task Force), information on the importance of quality training (MRTQ), and the current state dependent care tax credit benefits for higher quality care (Market Rate Survey report).

### ► ***The Private Sector Needs to be Engaged***

Several reports stressed the importance of targeted outreach to businesses and other

private sector leaders. The Business Commission specifically recommended creating a business advisory committee. Exploring the feasibility of establishing new tax policies that encourage private sector investments in child care was suggested in a report on the Economic Impact of the Child Care Industry in Maine.

The Market Rate and Workforce study also recommended that Maine take steps to encourage employers to become partners in the child care system. Suggested next steps included disseminating information on employer-supported child care options and existing tax incentives.

Engaging the private sector in early care and education is a key step. It will, however, be difficult without clear incentives. National research has indicated that state tax credits for employer-supported child care have not been effective incentives.<sup>3</sup> What, then, might be effective next steps? A more careful look at the way that other states have successfully engaged private sector partners might be in order. Colorado, North Carolina and Florida are three states that have actively engaged the private sector in early childhood system reform.

### ***Summary of Early Care and Education Strategic Planning in Maine***

In recent years Maine has been involved in a number of planning initiatives aimed at improving the early care and education system. Each of these efforts is summarized in the following chapters, and grouped into one of four broad categories.

<sup>3</sup> FitzPatrick, C. and Campbell, N. The Little Engine that Hasn't: The Poor Performance of Employer Tax Credits for Child Care. Washington D. C.: National Women's Law Center. November 2002.



# ***I. Systemic Planning: Overall Structure of System***

The following initiatives focused on planning/revising the overall early care and education, or early childhood services, system in the State of Maine.



## ***Child Care Advisory Committee***

The Child Care Advisory Council (CCAC) was established, in law, to advise the Legislature and the Department of Human Services regarding child care services in the state; encourage coordinated policy that promotes quality, uniformity and efficiency; and facilitate communication among state government, providers and the public. Each year the CCAC submits an annual report to the Legislature. The report includes a summary of CCAC activities and recommendations. The 2002 report included the following recommendations:

- Keep early care and education funding intact.
- Encourage cross-system approaches to serving children with special needs. This should include: expanding Child Care +ME to provide behavioral and health consulting regionally; revising MaineCare regulations to allow more services to be delivered in child care placements rather than only in the home; and, increase flexible funding to support books and assistive/therapeutic equipment.
- Ensure that the DHS Data Capacity grant identifies an established data set that can track trends and measure the effects of investments in early care and education. This should include data on: needs of children and families; current financial support (including tax credits); ECE program capacity and quality; ECE workforce compensation and qualifications; and, inclusion of children with special needs.

**CCAC Early Childhood Systems Committee** - In the summer of 2003, an ad hoc committee of the CCAC was formed to help define the early care and education “system” in Maine. The purpose of this effort is to guide policy that will enable and encourage coordination across all early care and education services, including public pre-K programs. This group has just begun its work, and will bring a report to the Child Care Advisory Council for further discussion.



### ***The Children’s Cabinet***

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Former Governor Angus S. King, Jr. established the Children’s Cabinet in 1995 to oversee and coordinate the delivery of services to children in Maine. It is composed of those state departments directly related to children and families: the Department of Corrections; Department of Education; Department of Human Services; Department of Behavioral and Developmental Services (formerly the Department of Mental Health, Mental Retardation and Substance Abuse Services); and the Department of Public Safety. The Cabinet crafted the following vision:

- Every child has the opportunity to be a child and the education, resources and support to become a healthy and productive adult.
- Every family recognizes the responsibility and rewards of raising children and is provided the support necessary to fulfill their role.
- Raising children is a shared community responsibility which includes a process of establishing and modeling clear standards of behavior.
- State agencies collaboratively support families and communities, keeping family and children at the heart of all decisions.

Using this vision as a guide, the Children’s Cabinet established 13 specific outcomes and identified specific indicators of Maine’s progress toward achieving each outcome. These are the Maine Marks (see Data Collection, page 11, for more information.)



### ***The Task Force on Early Childhood***

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The Task Force on Early Childhood was first established in the mid-1990’s as a sub-group of the Children’s Cabinet to work on the coordination of home visiting programs into a statewide home visiting system. It became the Task Force to Study Strategies to Support Parents as Children’s First Teachers through a Legislative resolve in 1997. More recently, the group further evolved into the Task Force on Early Childhood and has focused on “strengthening and coordinating systems that reach to achieve the vision of a state in which all children live, grow, and learn in safe, nurturing, healthy, and stimulating environments.”

Active members of the Task Force include representatives from: the Office of Child Care and Head Start, Home Visitation Network, Family Resource Centers, Communities for Children, Department of Education, Bureau of Health Title V Program, Public Health Nursing, Maine Humanities Council, Maine Children’s Alliance, Department of Behavioral and Developmental Services, Children’s Cabinet, and the School Readiness Indicators Project.

Over the past five years, partners from the Task Force on Early Childhood have:

- Helped create a home visiting system for all first time parents.
- Increased resources for quality child care.

- Carried out a study of current family support programs in Maine.
- Developed a plan to create a statewide system of family support programs.

In October 2002 the Task Force convened more than 80 diverse stakeholders in a “Children’s Forum” to begin developing a Maine-specific plan based on the four key recommendations from the National Academy of Sciences report, *From Neurons to Neighborhoods*.

## **Maine Maternal and Child Health Early Childhood Comprehensive Systems Grant**

The federal Maternal and Child Health Bureau’s (MCHB) has made funds available to states to “plan, develop, and ultimately implement collaborations and partnerships to support families and communities in their development of children that are healthy and ready to learn at school entry.” The Maine Division of Family Health has proposed that Phase I of the grant support a Future Search Conference as the key component of the planning process. The overall planning process will be coordinated by staff in the Title V MCH program, in collaboration with the Task Force on Early Childhood. (See Appendix A, page 27, for this group’s work plan.)

## **Infant/Toddler Initiative**

In February, 2003 leaders of Maine Infant and Toddler provider network came together to create a comprehensive list of needs and goals for the system. The primary purpose of this meeting was to prepare an application for technical assistance from Zero to Three (a national organization focused on

infant/toddler care). Unfortunately, the application was not funded. However, the group believes that the goals identified in this process are significant and is determined to continue this important work. Consensus was reached on four priority goals that would constitute the work of the partnership. These goals are as follows:

- *Increase quality, affordable, accessible infant/toddler care.* Strategies for achieving this goal include: providing more options of care, providing support for kith & kin care, continuing to look at ratio and group size, providing mental health support for caregivers and administering attachment assessment inventories to help determine quality.
- *Increase professional development opportunities for providers resulting in a more qualified credentialed workforce.* Strategies for achieving this goal include: offering additional courses specific to infants and toddlers, creating an infant/toddler credential, providing training on topics such as: Early Literacy, Attachment Assessment Inventory, Supporting Parents, and Diversity.
- *Work towards attaining a more stable, consistent work force by decreasing staff turnover.* Strategies for achieving this goal include: increasing professional development opportunities (see goal 2), improving wage scales, offering benefits, and providing mental health support for caregivers.
- *Increase parent and public awareness around what constitutes quality infant/toddler care.* Strategies for achieving this goal include: utilizing the media to bring information to families and change public consciousness, and instituting a star-rating system.

The Alliance for Children's Care, Education, and Supporting Services (ACCESS) is an alliance of early care and education providers and advocates whose mission is to ensure the availability of family focused services through collaborative relationships with traditional and non-traditional partners.

ACCESS members include:

- Maine Association for Child Care Resource Development Centers
- Maine Child Care Directors Association
- Maine Family Child Care Association
- Maine Head Start Directors Association
- Maine School Age Care Alliance
- Maine Division of Early Childhood

In early June 2000, the ACCESS Steering Committee brought together a cross section of the field to look at the big picture—to identify the early care and education landscape and suggest next steps for moving forward and improving the system. At a retreat setting the group spent two days working to identify the overarching issues and components within the early care and education system. The result of that work was identification of 11 areas that address the interwoven aspects of the early care and education system, and include the following categories for planning:

- To develop capacity and ability to manage/re-engineer effective resources at Federal, State, and Local level.
- To re-engineer the RDC system to be most effective
- To ensure a systematic inclusion and empowerment of parents at all levels of the system.
- To support and advocate for the integra-

tion of governmental systems/services for children, youth, and families.

- To build a system of supports for individualized formats of quality child care, informal to formal arrangements.
- To identify, access and/or develop resources to ensure adequate wages, benefits, and working conditions that create a climate that ensures that Early Care and Education becomes a desirable occupation.
- To build the most effective financial system to pay for quality childcare (parental choice, regardless of income).
- To market the concept of quality child care as "merit good" at local, state, and Federal levels to consumers and community.
- To develop a system at the local level responsive to the individual needs of growing children and their families.
- To build/integrate the unique needs of school age children systematically.
- To require a review of the definitions of common standards and best practices and guarantee sufficient resources to provide enforcement of minimum standards and rewards for best practices.



## ***ME Children's Alliance***

The Maine Children's Alliance recently launched a new planning initiative aimed at outlining the structural changes needed to create a unified system of services for Children and Families. While acknowledging that structural change (moving the boxes under one roof) will not automatically result in an integrated system, the Alliance believes that reorganization can:

- Support development of a single point of

entry for families seeking services;

- Reduce or eliminate the need for multiple assessments, treatment plans and case managers
- Provide unified information about the children and families being served, the effectiveness of those services and families and children's continuing needs;
- Reduce or eliminate administrative duplication in regulation, licensing, contracts, data management, planning and fiscal administration, saving millions of dollars;
- Simplify cost allocation for federal financing purposes and increase Maine's draw of federal dollars;
- Provide accurate information about what Maine actually spends on services for children and families;
- Expand federal dollars for development of critically needed human resources.

To this end, the Alliance recommends that services be organized in the following functional units:

*Case Management* – responsible for coordinating access to services via unified assessment and treatment plans. Case Management includes outreach and other efforts to assure access to services, such as the EPSDT program (“Early Periodic Screening Diagnosis and Treatment”, an outreach program within Medicaid) via administrative agreement with

the Medicaid agency. Case Managers with special training may manage safety assessment and protective action on behalf of the child.

*Community Support Services* – responsible for managing all direct services available in the community, including those provided directly and under contract or provider agreement. Crisis services should be an integrated community service, closely coordinated with direct care/treatment providers.

*Out of Home Services* – responsible for managing all residential services for children in voluntary arrangements or State custody, including in-patient, group treatment, residential treatment, foster care and out of State placement.

*Prevention and Early Intervention Services* – responsible for management of all pre-school services, such as child care, Head Start, Child Development Services, and related units of the Bureau of Maternal and Child Health.

*Family Independence Services* – responsible for administering financial resources for families.

The Alliance also recommends that these units be guided by a unified mission, based on a set of core values and guiding principles.



# ***II. Data Collection: Outcomes, Indicators, Benchmarks***

The following initiatives focused on identifying outcomes, indicators or benchmarks for early childhood services in general and/or early care and education services in particular, in the State of Maine.



## ***Early Childhood Learning Results***

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*The State of Maine Early Childhood Learning Results* Task Force began meeting in Fall 2002 in response to federal initiatives encouraging states to develop early learning guidelines that focus early childhood professionals on preparing young children to succeed in school. National legislation and initiatives—No Child Left Behind Act of 2001; the Good Start, Grow Smart Initiative; Head Start Child Outcomes Framework—point to the need to strengthen school readiness efforts across local, state, and federal early care and education systems. The Task Force prepared a draft document that underwent rigorous review by a panel of experts with knowledge of early childhood development and teaching practice. In addition, a forum was convened to solicit input from nearly 200 early childhood practitioners. Suggestions from each of these groups were incorporated into the final document.

One of the most important considerations in the development of the *Early Childhood Learning Results* was ensuring that it would apply to all children from three years of age to their entrance into kindergarten. These Learning Results establish goals and a continuum for what all children—including young children with unique learning needs and those with disabilities—should be able to do. The *Early Childhood Learning Results* were designed to align with the State's K-12 learning results, and therefore include similar

content areas, standard labels and performance indicators. But they also include unique aspects of development that are critical to young children's learning—the building blocks for all the other content areas.

It is important to note that the *Learning Results* document is not designed as a curriculum. A full curriculum contains detail about what children should know as well as approaches and sequences to helping children gain skills and knowledge. A curriculum often prescribes materials and methods. *Learning Results*, on the other hand, describe child outcomes for all young children for professionals to draw on as they design and shape curriculum and child assessment approaches.

*The State of Maine Early Childhood Learning Results* includes twelve content areas, which are as follows:

- Personal and Social Development – emotional development, self concept, social competence;
- Approaches to Learning – curiosity, risk taking, invention and imagination, persistence, reflection;
- Career Preparation – preparing for the future, education/career planning and management, integrated and applied learning;
- English Language Arts – the process of reading, literature and culture, language and images, informational texts, processes of writing and speaking;
- Health and Physical Education – health concepts, health information/services/products, health promotion and risk reduction, influences on health, communication skills, physical fitness, motor skills, personal and social interaction;

- Mathematics – numbers and number sense, computation, data analysis and statistics, geometry, measurement, patterns/relations/functions, discrete mathematics, mathematical communication/language;
- Modern and Classical Languages – person-to-person communication, reading/listening and viewing for understanding, oral and written presentations, workings of language, cultural practices, products and perspectives;
- Science and Technology – classifying life forms, ecology, cells, continuity and change, structure of matter, the earth, the universe, energy, motion, inquiry and problem solving, scientific reasoning, communication, implications of science and technology;
- Social Studies – civics and government, history, geography, economics;
- Visual and Performing Arts – creative expression, cultural heritage, criticism and aesthetics.



## **Maine Marks**

The Children's Cabinet shaped an overall vision for the well-being of children, families and communities. With the vision as the guide, the Cabinet then established specific outcome statements, which were designed as a way to think about and work on the vision in 12 manageable pieces. To help determine if Maine was achieving the outcomes, 80 indicators – or specific sets of data – were identified to help assess progress. Each year Maine Marks updates the indicators, adds data from the prior year, and analyzes trends.

The outcome and indicators identified by Maine Marks are as follows:

*Outcome: Children respected, safe and nurtured in their communities.*

- Youth Feeling Important
- Youth Opportunity For Community Involvement
- Youth With Caring Neighbors
- Youth Respecting Others
- Child Abuse & Neglect
- Prohibited Behavior In Schools
- Youth Feeling Safe To/From School
- Unintentional Injuries
- Youth Suicide Attempts
- Youth Illicit Drug Use
- Youth Obesity
- Youth Physical Activity
- Children And Youth With Health Insurance
- Low Birth Weights Infants
- Young Children Immunized
- Youth Pregnancy
- Children And Youth In State Care Or Custody
- Home Care Of Youth With Severe Behavioral Health Problems
- Families Learning And Cultural Activities
- Youth Mentored
- Youth With Positive Adults In Their Lives

*Outcome: Children ready to enter school and schools ready for children.*

- Children With Special Education Needs Entering School
- Reading To Children
- Children Showing Appropriate Progress
- Opportunities For Expanded Day Kindergarten
- On-Site Before Or After School Programming
- Teachers With Early Childhood Certification

*Outcome: Children succeeding in school and schools succeeding for children.*

- Youth Achieving Learning Results

- High School Completions
- High School Drop-outs
- Youth Planning To Attend College
- Youth At-Risk With Supportive Service Plan
- Coordinated School Health Programs
- Parent Involvement In School

*Outcome: Youth succeeding in higher education.*

Indicators:

- Youth Satisfaction With Colleges/Universities
- College/University Retention
- Bachelor's Degree Attainment
- Outcome: Youth prepared to enter the work force.
- Indicators:
- Businesses' Need To Provide Training
- Businesses' Satisfaction With Colleges/Universities
- Youth In Apprenticeship/Internships
- Schools With Career Preparation Learning Results Standards

*Outcome: Families having opportunities to work and play.*

Indicators:

- Jobs That Pay A Livable Wage
- Children Living In Female-Headed Households Below the Poverty Level
- Gender Income Disparity
- Family Housing Costs
- Family Time For Leisure And Recreation
- Parents' Satisfaction With Youth Recreational Programs

*Outcome: Families recognizing the rewards and responsibilities of raising children.*

Indicators:

- New Family Stability
- Youth Not In School And Not Working
- Youth Arrests



- Youth Success After Leaving Juvenile Justice System
- Youth Feeling Supported In Their Family

*Outcome: Families living safe and healthy lives.*

Indicator of Safe Families:

- Domestic Violence
- Housing Problems
- Food Insecurity
- Prenatal Care
- Newborns Receiving Home Visits
- Health Care Coverage

*Outcome: Communities capable of meeting the needs of children and families in all of their diversity.*

- Health Care Providers
- Employment
- Leaving Welfare
- Leaving Welfare To Jobs That Pay A Livable Wage
- Youth Living In Homeless Or Emergency Shelters
- Youth In Poverty
- Satisfaction With State Government
- Hate Crimes
- Employment Rates Of The Disabled
- Outcome: Communities Creating Collaborative Partnerships
- Communities In Partnership With State Government
- Businesses' Involvement With Community
- Youth In Community Service

*Outcome: Communities Promoting and Modeling Clear Standards of Behavior*

- Crime
- Community Safety
- Factors Promoting Drug Abuse
- Voter Turnout
- Volunteerism

*Outcome: Communities Keeping Children and Families at the Heart of All Decisions*

- Perception Of Youth As Community Assets
- Youth Who Feel Cared For In Their Community
- Perception Of Communities As A Good Place To Raise Children
- Access To Child Care
- Satisfaction With Child Care



## ***School Readiness Indicators Project***

The School Readiness Indicators Initiative is a multi-state initiative aimed developing a set of child outcome and systems indicators for children from birth through the fourth-grade reading test. The Initiative involves 17 states, including Maine. (Other participating states include: Arizona, Arkansas, California, Colorado, Connecticut, Kansas, Kentucky, Massachusetts, Missouri, New Hampshire, New Jersey, Ohio, Rhode Island, Vermont, Virginia, and Wisconsin.) Each state team developed a comprehensive set of measures to monitor school readiness and service system outcomes for children and families and participated in four national meetings between October 2001 and May 2003. Two more national meetings are planned for Fall 2003. The Maine team included representation from: Department of Education; DHS Bureau of Health and Office of Child Care and Head Start; Success by Six, and the Maine Marks Initiative. Maine's team built on the indicators in Maine Marks, and added new measures as needed. Preliminary Recommendations for Core School Readiness Indicators are summarized below. At present, a report that summarizes the school readiness indicators is being prepared, and the group plans to report on progress each year.

## ***I. Family Environment***

### ***Family Support for Learning***

- Education level of the mother, father
- Percentage of 3-5 year old children participating in home literacy activities
- Percentage of families who read to their children
- Number of families receiving greater than one home visit in the first year of life

### ***Stable Homes/Environment***

- Number of moves within foster care system

### ***Health Status of Family***

- Percent of mothers who receive prenatal care in the first trimester
- Number of Low Birth Weight Infants by Plurality
- Number of Very Low Birth Weight Infants

## ***II. Early Care and Education***

### ***Trends in Early Childhood Education***

- Higher Education Enrollment
- Child Care Center Staff Average Salary and Average Hourly Wage
- Turnover During the Past 12 Months in Maine Child Care Centers
- Number of Quality Certificates Awarded
- Number of Accredited Child Care Programs

### ***Availability of Early Childhood Education Programs***

- Number of Licensed Child Care Facilities in Maine

### ***Family support services***

- Number of libraries offering preschool reading sessions
- Number of communities with Family Resource Centers
- Number of parks and rec. programs/hours of operation

### ***School Conditions***

- Number of schools with full day kindergarten

- Number of public 4 year old programs
- Number of teachers with 0-5 282 endorsement, K-3 282 endorsement

## ***III. Effective Services: Health and Child Development***

### ***Percentage of Insured Children***

- Childhood Lead Analysis

### ***Effective Services: Early Intervention***

- Number of children in Early Intervention Programs
- Number of children entering kindergarten who exited special education to regular education

### ***Effective Services: Child Welfare***

- Children who receive a developmental screen upon entry into foster care
- Follow-up services as a result of referral to CDS

### ***Effective Services: Income Supports (such as TANF, Food Stamps, etc.)***

- The percentage of children under age 5 living in poverty
- The percentage of jobs that pay a livable wage

## ***IV. Ready Child—Physical Well-Being and Motor Development***

- % of children entering kindergarten with untreated vision problems
- % of children entering kindergarten with untreated hearing problems

### ***Ready Child—Social and Emotional Development***

- Substantiated cases of child abuse and neglect. (DHS)
- Percentage of kindergarten students who can establish and maintain positive relationships with peers and adults

### ***Ready Child—Early Literacy and General Knowledge***

Percentage of increase by Head Start children in the following indicators

- Understands an increasingly complex and varied vocabulary
- For non-English-Speaking children, progresses in listening to understanding English
- Develops increasing abilities to understand and use language to communicate information, experiences, ideas, feelings, opinions, needs questions and for other varied purposes
- Uses an increasingly complex and varied spoken vocabulary
- For non-English—speaking children, progresses in speaking English
- Associates sounds with written words
- Recognizes a word as a unit of print
- Identifies at least 10 letters of the alphabet, especially those in their own name
- Knows that letters of the alphabet are a special category of visual graphics that can be individually named

Percentage of children experiencing difficulties in language development when arriving at kindergarten

Percentage of children experiencing difficulties in basic academics when arriving at kindergarten



## **ACCESS Benchmarks**

During its retreat, ACCESS also developed recommended benchmarks for the Maine early care and education system as a whole. These include the following

### **Accreditation**

- By 2005, 20% of all programs will be accredited (as defined)
- By 2010, 50% of all programs will be accredited (as defined)

ACCESS believes that, over time, every family have access to accredited childcare program and that support should be provided to all programs seeking accreditation.

### ***Business Involvement:***

- By 2002, brochures will be available to all childcare providers outlining business support available.
- By 2005, the childcare industry in Maine will have made significant strides towards bridging existing cultural differences between the business and childcare communities.
- By 2004, 3 State Collaboratives will have developed/created a system for implementing administrative efficiencies (cost saving structures)
- By 2005, partnerships with the business community that develop childcare quality and increase the childcare supply in Maine will double.

### ***Capacity:***

- By 2005, 50% of eligible children will be served in the setting of their choice and every community with an elementary school will have a school age program.
- By 2010, Maine will be able to serve 100% of the eligible children.

### ***Education and Training:***

Specific percentages have yet to be agreed upon for the following benchmarks:

- By 2005, a (to be determined) % of ECE providers will have a CDA or higher in a related field. 50% of caregivers will be registered.
- By 2010, a (to be determined) % of ECE providers will have a CDA or higher in a related field. 80% of caregivers will be registered.

#### Parent Involvement:

- By 2005, every ACCESS collaborative will have active parent participation.

#### Caregiver Wages:

Specific percentages have yet to be agreed upon for the following benchmarks:

- By 2005, a (to be determined) % of staff will earn a (to be determined minimum) salary with (to be determined minimum) benefits.



### ***Maine Child Care Data Analysis and Research Partnership***

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Last year Maine received a grant from the federal Child Care Bureau to create a statewide research infrastructure to better understand child care needs, services, and outcomes for families in the context of social, economic and cultural change. First year activities focused on building a new centralized data base that can maintain data on the families, children and providers who participate in Maine's child care subsidy contract and voucher programs. Phase I of the database work includes all contracted child care agencies, who will connect and enter data through a web-based application. It is anticipated that this new system will be ready to begin testing in February 2004 and will "go live" with all agencies in April 2004. The next phase will focus on the voucher system.

In addition to generating more reliable and available data for reporting purposes (including the federal 800 and 801 requirements) it is anticipated that the new data collection system will provide greater security, easier data maintenance and greater flexibility. Once the database is operational the project will focus on other research needs. To date, the following areas of potential research have been identified:

#### *Program Evaluation*

##### Child Care Plus ME

- Effectiveness data
- Descriptive data (those served and expelled)

##### Maine Roads to Quality

- Impact of professional development on children
- Impact of accreditation project on program development

##### Infant Toddler Training and Support

- Implementation, process and outcomes data

##### School Age Care

- Availability, effectiveness/outcome measures

#### *Evaluation of Policy Impact*

##### Tax Credits

- Study of impact of two tax credits on quality

##### Quality Certificates

- Number of quality programs developed, funding effects on numbers of children served

##### Regulation Changes

- Effects of state regulation changes on availability, price and quality of care

#### *Research to Inform Policy Development*

##### Parent Survey

- Survey of parents with children ages 0-12 to determine availability of child care, types of child care being used and accessibility of quality child care

##### Mapping Project

- Mapping location of contracted centers and family homes in relation to number of low-income children in the area. Mapping location of licensed child care centers and homes in relation to numbers of children in an area of the state.

# III. Professional Development

The following initiatives focused on planning, establishing, or revising a system of professional development for practitioners in early care and education programs in the State of Maine.



## **Maine Roads to Quality (MRTQ)**

Ten years ago, the Maine Office of Child Care and Head Start convened 100 child care and early education stakeholders to develop recommendations for a career development system. The recommendations were published in 1994 in a document entitled, *Pathways to Quality: Toward the Development of a Comprehensive Training Plan for Child Care Practitioners in Maine.*

A great deal of progress has been made in implementing this plan. The 16 recommendations of this group are summarized below, followed by a brief summary of what has been accomplished thus far. Last year, the MRTQ Advisory Board developed a 2003-2004 work plan. The goals identified in this plan are noted as well.

**Recommendation** on Public Outreach – Develop a public awareness campaign to educate parents, employers, early care professionals and the community about how quality training related to the provision of quality child care.

*Progress to date:* A public education campaign has begun but needs to be expanded and targeted to specific needs and issues. The 2003-2004 MRTQ Advisory Board Work Plan made expanding membership in the public awareness committee, and developing targeted public awareness presentations and resource materials, key goals.





**Recommendation** on Core Knowledge Areas – Maine’s career development system should include the eight common core knowledge areas established by the National Association for the Education of Young Children (NAEYC).

*Progress to date* A 180 hour Core Knowledge Curriculum, based on the NAEYC core knowledge areas and aligned with higher education standards, has been developed. As of September 30, 2003, nearly 3,300 care and education providers have participated in this training.

**Recommendation** on Types of Training – The career development system should contain 3 training categories: orientation, pre-service, and on-going inservice training. All three categories should be based on the common core of knowledge identified above.

*Progress to date:* The Core Knowledge Training (noted above) includes orientation, pre-service and some on going training. Providers are encouraged to participate in credit courses from the Community Colleges or the University to meet their training needs for advanced courses. A scholarship program to help practitioners obtain needed training and education has been established.

**Recommendation** on Distribution of Ongoing Training Time – Distribution guidelines should be developed around the existing licensing requirements: 30 hours annually for staff training in centers and 6 hours annually for family child care providers.

*Progress to date* The Maine Roads Core Knowledge Training Program consists of 14 modules that range from 3 to 30 hours in length.

**Recommendation** on Training Delivery Methods – A plan should be developed to

help ensure that training is accessible to providers in all regions of the State. Existing resources should be used and collaboration encouraged to avoid duplication. New ways of delivery training via technology should also be explored.

*Progress to date* The Resource Development Centers currently offer Core Knowledge Training in 39 sites across the state. One RDC relies on videoconferencing to promote greater access. MRTQ will ensure that at least one of the modules will be offered on the web within the next year.

**Recommendation** on Ongoing Training Hours – Additional training should be available and accessible in all areas of the state for providers who choose to participate.

*Progress to date* The Community Colleges and the University System now offer courses in many areas of the state, through the Instructional Television (ITV) System and through web based courses.

**Recommendation** on Needs Assessment/Gap Analysis – A uniform needs assessment instrument should be developed and used by each of Maine’s RDCs to determine what training providers in each region want and need.

*Progress to date* Implementation pending

**Recommendation** on Needs Assessment Process – Uniform needs assessment should become part of the existing RDC system responsibilities and appropriate public and private financial resources should be identified to carry out this function.

*Progress to date* Implementation pending

**Recommendation** on Regional Training Coalitions/Needs Assessments – Each RDC should convene regional training coalitions to help determine training needs.

*Progress to date* Implementation pending.

**Recommendation** on Data Collection – A statewide clearinghouse should be established for training resource data collection, storage and dissemination. This information should be made available in a “user friendly” format and organized by geographic area, training topic and level of training.

*Progress to date* A list of core knowledge trainings being offered around the state is available on the web.

**Recommendation** on Career Development System/Compensation – A subcommittee should examine the results of Maine’s salary survey and evaluate the NAEYC salary guidelines and formulas for possible adaptation to Maine.

*Progress to date* Implementation pending

**Recommendation** on Career Development System/Registry – A voluntary registry to document the individual practitioner training records should be established. A committee should be created to: oversee the establishment of the Registry; review and adapt the Wisconsin model; determine the location and oversight; identify funding; and, develop guidelines for access.

*Progress to date* The Maine Roads Registry, a computerized data system, has been developed to collect data on the training, education and employment history of early childhood practitioners. Records of all individuals who participate in MRTQ training are maintained by the Registry, and participating practitioners receive a certificate indicating their level on the state’s career lattice. As of September 30, 2003, the Registry included 2,031 members, or about 23% of the early care and education practitioners in the state.<sup>4</sup>

**Recommendation** on Training Assessment Qualifications/Training Content – Develop a process to review trainer qualifications and training content to ensure quality training.

*Progress to date* A Maine Roads Trainer Registry has been developed to ensure that trainers who deliver the core knowledge training meet certain standards and higher education requirements. To date, over 200 trainers are included in the Registry.

**Recommendation** on Formal Recognition of Training – A subcommittee should be established to review and improve communication and articulation among higher education institutions in early care and education.

*Progress to date:* Articulation agreements have been developed and signed among the Department of Human Services (as a funder of the Core Knowledge Training), Maine Roads to Quality (as system manager), the Resource Development Centers (as training delivery systems) and the Maine Community College System. The Maine Roads Core Knowledge Training Program is articulated for nine college credits. A number of articulation agreements have also been developed between the two-year and four-year college early childhood education programs.

**Recommendation** on Funding – A subcommittee should be assigned to investigate and identify potential public and private funding sources for the professional development system.

*Progress to date:* A number of ACCESS groups have acquired funding to expand the work of the professional development system through the federally funded Early Learning Opportunity Grants.

<sup>4</sup> This estimate is based on data from a June, 2003 report by Alex Hildebrand, entitled *The Economic Impact of the Child Care Industry in Maine*. This study estimated that the early care and education industry employed 8,824 individuals.

The MRTQ Advisory Board 2003-2004 plan included several new goals that were not in the 1994 document. These include the following:

- *Increase the number of accredited programs by 25 percent.* MRTQ intends to develop a strategic plan to expand accreditation on a statewide basis, develop new resources to support programs pursuing accreditation, and develop training and information resources to raise awareness of the benefits of accreditation.
- *Promote diversity in all services, products and partners.* This includes recruiting members from culturally diverse populations, defining culturally responsive practice, and compiling an inventory of culturally responsive resource in Maine.
- *Promote director and teacher credentialing* through legislation and research on best practices in other states.



### ***Early Childhood Higher Education Committee***

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The Early Childhood Higher Education Committee was created in 1992 to facilitate communication and promote articulation and transfer agreements between programs that offer two and four year early childhood education programs and the state policy makers. The Committee is currently staffed by Maine Roads to Quality staff. One of the major accomplishments of the committee has been the articulation agreements between the Maine Community College System, Maine Roads to Quality, the RDCs and the State Department of Human Services. The committee is also used as a forum to discuss transferability of courses, standardization of practicum experiences and issues of concern to the field. Current concerns are the high faculty/student ratios,

the lack of a teaching certification specifically for public pre-K programs and the shortage of four-year Early Childhood Education degree programs to meet the needs of students. In the Fall of 2003, 927 students were matriculated in associates degree programs in Maine out of a total of 1,540 students enrolled in Early Childhood Education and Early Childhood Special Education degree programs throughout the State.



### ***Head Start***

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Head Start has a strong set of performance standards that have been included in Maine's Quality Early Care and Education program standards. Additionally, the federal Head Start statute requires that, no later than September 30, 2003, at least 50 percent of all Head Start teachers nationwide in center-based programs must have an associate, baccalaureate, or advanced degree in early childhood education; or an associate, baccalaureate, or advanced degree in a field related to early childhood education, with experience in teaching preschool children. Head Start funds have been made available to assist programs in securing college education opportunities for their staff and in compensating staff who attain degrees.



### ***Credentialing Task Force***

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In January 2002 the Maine Child Care Advisory Council authorized a task force to consider the feasibility and desirability of instituting a credentialing system for Early Childhood Education (ECE) in Maine. The Task Force included representatives from: the Office of Child Care and Head Start/DHS, the Maine Child Care Directors' Association, the Maine Family Child Care Association, the Head Start Directors' Association, Maine



Resource Development Centers, Maine Roads to Quality (MRTQ), and the Higher Education Committee. The group met monthly through most of 2002, gathered information on the legal prerequisites for the regulation of professions in Maine and also examined the structures of other occupations within Maine, including: law enforcement/public safety, electricians, nursing, dieticians, public school education, speech pathology, and child life. The Task Force also sponsored a conference to discuss credentialing with ECE practitioners from around the state and to collect their input.

The Task Force concluded that Maine should establish a system of credentialing based on certificates (with endorsements and authorizations) rather than licenses and that, over a period of time, the ECE training infrastructure be revised to support the credentialing system. Specific recommendations include:

- Credentialing should be systemic, i.e. applying to all facets of the field (center-based, family care, Head Start, nursery schools). It may not be necessary to have a credential for every job, but each position should be addressed.
- The credentialing system should build upon the successful and familiar infrastructure currently in place, i.e. Maine Roads to Quality, Resource Development Centers, the technical college system, and

four-year degree programs, but also consider common features of other occupation structures in Maine.

- Credentials should reflect these qualities: challenging, achievable, rewarding, competency-based, flexible, respectful, informative, complementary, continuing, and tiered.
- Credentialing should be implemented when it can fulfill the following five points of potential benefit: inform and protect the public and employers; improve ECE quality; enhance practitioners' self-image and public esteem; improve compensation.
- The ECE community should be provided ample notice prior to implementation of required credentialing. A period of voluntary credentialing to test the capacity of the ECE community and its education and training infrastructure to support credentialing should be considered.
- Credentialing administration should be paid for primarily by fees.
- Where to administer credentialing was the most difficult question the Task Force confronted, and it could reach no consensus on the issue. The complicating factor is that there is overlapping involvement in ECE by two State departments, Human Services (DHS) and Education (DOE).

# ***IV. Finance***

The following initiatives focused on planning/revising financing strategies and/or specific funding approaches for early care and education services in the State of Maine.



## ***Business Commission Report***

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In 1999, Maine created the Business Advisory Commission on Quality Child Care Financing to analyze the effectiveness of economic development incentives to encourage the development of quality early care and education services in the state. The Commission met four times and developed the following recommendations:

*Promote Accreditation* – Expand the accreditation facilitation project at the Muskie School of Public Service, using the first accredited centers as mentors for new providers going through the process. Create a linked investment program through the Finance Authority of Maine and the Treasurer’s office to improve the availability of affordable loans to upgrade facilities and equipment needed for accreditation.

*Strengthen Data Collection* – Make funds available to collect annual data to accurately access the availability, cost and quality of child care services. Ask the Maine Economic Growth Council to include child care as an economic development measure and establish benchmarks for early care and education. Request the Economic Development Incentives Commission to assess the effectiveness of incentives for child care and report their findings to the business subcommittee of the CCAC.



*Establish Regional Collaborations* – Award 3 to 5 regional incentive grants aimed at encouraging partnerships among early care and education providers to model integration of administrative and businesses functions. The pilots would create replicable models to achieve economies of scale in administrative services.

*Improve Caregiver Wages and Tuition Assistance* – The CCAC should pay special attention to compensation and develop recommendations on ways to increase wages as programs move toward accreditation. Additionally, data collection efforts should include comprehensive wage information. The Child Development Associate (CDA) certification tuition assistance program should be non-lapsing.

*Business Involvement* – Create a Business Advisory subcommittee of the CCAC to develop a statewide business and child care conference, workshops and the Blaine House conference, and a focus on child care at the Maine Development Foundation Measures of Growth conferences. The subcommittee should also monitor the child care industry's progress toward accreditation and track the effectiveness of child care tax credits. Additionally, the DHS Office of Child Care should develop a brochure outlining the business support available and distribute to providers applying for a license.

*Facilities* – Create a linked child care facility investment program through the Finance Authority of Maine and the Treasurer's office (see above). Direct the State Fire Marshall to work with the Joint Standing Committee on Education on fire code issues as they relate to school facilities.



## *The Maine Child Care Market Rate and Workforce Study*

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In the fall of 2002, the ME Office of Child Care and Head Start contracted with Mills Consulting Group, Inc. to conduct an analysis of the state's child care markets that could help guide recommendations regarding issues of rate setting, workforce, accessibility, and quality. The report included the following recommendations:

*Improve the compensation of child care workers in Maine* through: education, professional development program awards and bonuses, and wage supplements based on levels of education and experience.

*Mobilize public support and awareness of the benefits of quality child care programs* through: a public relations campaign with multiple prongs, a diverse constituency, parent education via RDCs, and publicizing the state Dependent Care Tax Credit benefits for higher quality child care.

*Encourage employers to become partners in the child care system* through: disseminating information on employer-supported child care options and existing tax incentives.

*Increase child care provider access to health insurance* through: exploring the feasibility of child care worker access to the state health insurance plan, other subsidized health insurance options, or a purchasing pool sponsored by the RDCs; and, publicizing the availability of MaineCare for low-income state residents.

*Revise child care subsidy rates by:* adjusting rates to recognize additional hours in care and increasing the percentage of subsidy.

*Increase and diversify child care staff recruitment and retention efforts* through:

hiring a recruitment and retention specialist for the RDC system, working with college placement offices, encouraging high schools to offer early care and education classes, establishing a director credential, and increasing public awareness as well as links to TANF recipient training.

*Increase opportunities, access and support for provider education and training* through: closer links between RDCs and local colleges, encouraging more colleges to offer BAs in early childhood, establishing a statewide mentoring program, creating a substitute program linked to professional development, and developing classes on business skills for child care providers.

*Increase financial support and incentives for more child care education* including: a loan forgiveness program, increased scholarship opportunities, salary increases linked to increased education, incentives for child care programs to offer paid release time to attend training, financial support for providers to attend the Infant/Toddler Institute.

*Encourage providers to offer infant/toddler care or to expand their existing capacity for care* through: additional financial support for infant/toddler care, a facility loan or grant program.

*Increase financial support for accreditation* through a higher reimbursement rate for accredited programs.

*Increase demand for accredited programs* through: heightened awareness of the financial advantages of becoming accredited, the financial and technical supports available through Maine Roads, and the state income tax benefits for families that choose accredited care.



## ***Economic Impact of Child Care Industry***

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The federally-funded Cumberland County ELOA (Early Learning Opportunities Act) Project recently commissioned a study of the economic impact of the child care industry in Maine. The study revealed that licensed child care establishments generate over \$180 million in gross receipts and employ over 8,800 Maine residents each year. (The industry is comparable in size to farming and fishing.) In addition to its direct employment and purchases, child care makes a significant contribution to the state economy by enabling parents to enter and remain in the workforce. Working families who rely on child care earn \$854 million annually. In addition to quantifying the financial contributions made by the child care industry, the report makes the following recommendations:

- *Integrate child care into economic development planning.*
- *Reduce land use and zoning barriers to child care facility development.*
- *Ensure that Maine leverages all available state and federal funds to support affordable child care.*
- *Explore new tax policies that encourage private sector investment in child care or make child care more affordable for working families.*
- *Develop a child care facilities fund to offer low-interest loans and grants to child care providers.*



## ***Next Steps***

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Maine continues to strive toward coordinated early childhood services. Planning groups continue to evolve. The Department

of Education is beginning to work toward the goal of making pre-kindergarten services universally available to all four-year old children through early childhood programs in schools and community-based organizations such as Head Start and child care centers. A cross-department task force will begin work on details of this goal shortly. The vision for the future is that all children enter kindergarten ready for school.

The Bureau of Health within the Department of Human Services is about to embark on another early childhood services planning process with funds from the federal Maternal and Child Health Bureau. The Bureau of Family Health has proposed that Phase I of the grant support a Future Search Conference.

The Child Care Advisory Council will continue to discuss system integration between all types of child care and public school programs.

The Office of Child Care and Head Start will develop a strategic plan to guide its work in the next two to five years.

Hopefully this summary of early care and education planning efforts can serve as a springboard for that work. Based on the analysis completed for this report, next steps include the following:

- *Develop common standards for all early care and education programs and practitioners in Maine, regardless of auspices or funding stream.* Explore the feasibility of implementing these standards in the form of a “star” quality rating system for programs, and a credentialing system for practitioners, that applies to early childhood services in all domains (e.g. child care, Head Start, pre-kindergarten, etc.) Ensure that these standards link to the Maine Early Learning Results as well as: the Maine Roads to Quality career lattice, Head Start perform-

ance standards, and pre-kindergarten teacher requirements and program guidelines. Wherever possible, link standards to financial incentives such as the DHS subsidy system and the current dependent care tax credit for higher quality programs.

- *Establish a set of common early care and education outcomes and indicators that are used by all funders and system administrators.* A first step would be to “cross-walk” the outcomes and indicators established by the planning efforts described in this report (ME Early Learning Results, School Readiness Indicators Project, and ACCESS) to identify common elements. Based on these common elements, compare outcomes and indicators to the standards ME has currently established for early care and education programs and practitioners to ensure that current accountability measures will lead to the desired outcomes.

- *Compare the new Learning Results with early childhood courses taught at the community colleges, the university system, and the RDCs to determine if practitioners are being prepared to implement the Early Childhood Learning Results.* Career development efforts, and credentialing in particular, will not be effective unless the course content effectively prepares practitioners to help children achieve the desired outcomes. To this end, it will be necessary to “cross-walk” college course content — and well as the core knowledge, career lattice and registry requirements used by Maine Roads to Quality — with the new Learning Results and other desired outcomes to ensure that practitioner training is linked to learning outcomes.

- *Review the State’s current data collection capacity and plans to ensure that the data needed to track progress in achieving outcomes and evaluating programs are available.* Cross-system data collection, using



common data elements, is an essential component of a comprehensive early care and education system. At present, the various components of the system gather data in different ways, using different automated systems and different data sets.

- *Review the technical assistance and support services that are currently available to early childhood programs in the State of Maine.* The goal of this inquiry is threefold: 1) to document what is currently available; 2) to determine if current efforts sufficiently prepare programs to operate efficiently and also meet the quality standards defined by the new Learning Results; and 3) to identify approaches that could most effectively help programs meet and maintain quality standards.

*Review current home visiting and family support services to strengthen coordination among these efforts.* If school readiness is a goal for home visiting, research indicates that strong linkages between home visitors and classroom teachers in center-based early learning programs and schools are an essential step. For children enrolled in family child care options, it will be important to build linkages between home visitors and home-based child care providers.

# Task Force on Early Childhood Work Plan – Sept. 2003

\*Four Homes: Family, Educational/Child Care, Medical/Health Care and Community

GOALS/ OBJECTIVES	INPUTS (Resources & Assets) People, programs, policies and funds that exist in one or more "Homes" <sup>8,9</sup>	OUTPUTS/ACTIVITIES To achieve the Goals/ Objectives given the resources and assets in one or more of the four "Homes" <sup>8,9</sup>	OUTCOMES and INDICATORS
<b>I. Greater Commitments to Assist Parents of Young Children</b>			
A. Children will be nurtured by healthy loving parents who have a sound knowledge base of child development and who have developed a broad range of skills essential for parenting	<p><b>Family Home</b></p> <ul style="list-style-type: none"> <li>• Parent(s), Significant Others, Extended Family</li> </ul> <p><b>Educational/Child Care Home</b></p> <ul style="list-style-type: none"> <li>• Pre-K – 12 Educational Institutions</li> <li>• Home Visiting Programs</li> <li>• Child care providers</li> <li>• Early Head Start/Head Start</li> <li>• Family Resource Center • Networks</li> </ul>	<p><b>Administrative</b></p> <ul style="list-style-type: none"> <li>• Personnel assigned</li> <li>• Draft policy with incentive for change</li> <li>• Toll-free help line</li> <li>• Action plan for systemic change</li> </ul> <p><b>Information Dissemination</b></p> <ul style="list-style-type: none"> <li>• Fact sheets on child development</li> <li>• Presentations</li> <li>• Home Visits</li> <li>• Family Resource Centers</li> <li>• Parent study/support groups</li> <li>• Development of Guide to Employer Best Practices for family friendly environments</li> </ul> <p><b>Evaluation</b></p> <ul style="list-style-type: none"> <li>• Needs Assessments/Review of Gaps and Resources</li> <li>• Baseline data collection</li> <li>• Process evaluation</li> <li>• Develop Reports on Progress</li> <li>• Research on the impact/implications of the No Child Left Behind Act</li> </ul>	<p><b>Short</b></p> <ul style="list-style-type: none"> <li>• Parents gain new/enhanced knowledge of child development</li> <li>• Parents and child interact positively</li> <li>• Parents provide alternative to media and provide opportunities for constructive play</li> </ul> <p><b>Intermediate</b></p> <ul style="list-style-type: none"> <li>• Community leaders and policy makers consider impacts of family-friendly policies and the workforce</li> <li>• Alignment between early childhood system and state standards for early grades in schools</li> </ul> <p><b>Long-term</b></p> <ul style="list-style-type: none"> <li>• Change in cultural norm; change in workplace benefits, etc.</li> <li>• Children are nurtured by healthy, loving parents</li> <li>• Infrastructure of services to support parents and caregivers, helping to improve or enhance parent skills</li> <li>• Children meet developmental milestones or are referred for services, resulting in greater school readiness</li> <li>• Lower rates of bullying, school violence, child abuse and neglect</li> <li>• Improved availability of quality child care</li> <li>• Sustained business commitment to Pre-K – 12 education</li> </ul>
B. Family Resource Centers are established and utilized, serving as the hub of community services designed to improve family life			
C. Young children will be protected from exposure to violence and trauma by their families and communities	<p><b>Medical/Health Care Home</b></p> <ul style="list-style-type: none"> <li>• Health Care Professionals, Mental Health, and Substance Abuse</li> <li>• Domestic Violence and Violence Prevention Programs</li> <li>• CDS</li> <li>• Research on child development and brain development</li> </ul> <p><b>Community Home</b></p> <ul style="list-style-type: none"> <li>• Local Resource Development Centers</li> <li>• Local Cooperative Extension Offices</li> <li>• Communities for Children</li> <li>• ACCESS</li> <li>• Children's Cabinet</li> <li>• Maine Children's Trust</li> <li>• Mainely Parents</li> <li>• Office of Economic Development</li> </ul>		
D. Maine men and women will be supported in the work force in their roles as parents; employers will support family participation in Early Care Programs			

GOALS/ OBJECTIVES	<b>INPUTS</b> (Resources & Assets) People, programs, policies and funds that exist in one or more “Homes” <sup>47)</sup>	<b>OUTPUTS/ACTIVITIES</b> To achieve the Goals/ Objectives given the resources and assets in one or more of the four “Homes” <sup>47)</sup>	<b>OUTCOMES and INDICATORS</b>
<p>A. Reform the healthcare system to tap current unproductive healthcare expenditures in order to fund and make universally available: Preventive, developmental and evidence-based alternative services which optimize the physical, mental and social health of every woman of childbearing age, every child and the men in their lives</p> <p>B. Every community is motivated to dedicate quality, accessible, affordable, and comprehensive care of all children in a timely manner, based on the understanding of financial and humanistic benefits</p> <p>C. Healthy early childhood development is established in statute as a civil right with a government entity held accountable. Requiring this to happen will force money to come down (be appropriated) to meet the needs</p>	<p><b>Family Home</b></p> <ul style="list-style-type: none"> <li>• Parent(s), Significant Others, Extended Family</li> <li>• Educational/Child Care Home</li> <li>• Home Visiting Programs</li> <li>• Early Head Start/Head Start</li> </ul> <p><b>Medical/Health Care Home</b></p> <ul style="list-style-type: none"> <li>• Health Care professionals, Mental Health, Substance Abuse</li> <li>• Federal Maternal and Child Health</li> </ul> <p><b>Community Home</b></p> <ul style="list-style-type: none"> <li>• Local Community Resources</li> <li>• Local Resource Development Centers</li> <li>• Local Cooperative Extension Offices</li> <li>• Communities for Children</li> <li>• Child Development Services</li> <li>• Governor</li> <li>• Children’s Cabinet,</li> <li>• Regional Children’s Cabinet</li> <li>• Tri-branch Council on Children and Families</li> <li>• Legislature</li> <li>• Office of Economic Development</li> <li>• Domestic Violence and Violence Prevention Programs</li> <li>• Advocacy Organizations</li> <li>• Maine Children’s Alliance</li> <li>• Maine Children’s Trust</li> <li>• ACCESS</li> <li>• Start Me Right</li> <li>• Process Improvement model</li> <li>• Federal Grant Opportunities</li> </ul>	<ul style="list-style-type: none"> <li>• Children’s Cabinet and Early Childhood Task Force identify common work plan</li> <li>• Identify state budget for early childhood</li> <li>• Identify community based early childhood resources</li> <li>• Literature search on promising practices</li> <li>• Ally with new Health Executive Level Health Policy.</li> <li>• Ally with Maine chapters of American Academy of Pediatrics and Family Physicians</li> <li>• Implement process improvement model to review resource allocation and make recommendations for realignment</li> <li>• Develop management and oversight mechanism.</li> <li>• Submit grant for Early Childhood Comprehensive Systems</li> </ul>	<p><b>Short-term Outcomes</b></p> <ul style="list-style-type: none"> <li>• Staff support</li> <li>• Everyone working off the same page to increase likelihood of achieving long-term outcomes.</li> <li>• Baseline Knowledge of resources base</li> <li>• Improving communications between state and community for program implementation.</li> <li>• Promote promising practices</li> <li>• Pursue universal primary care</li> <li>• Coordinate efforts with health care community</li> <li>• Maximize the effectiveness of obtaining and providing the resources; to monitor the performance or make alterations when needed? (Kind of like Self policing the process)</li> </ul> <p><b>Longer-term Outcomes</b></p> <ul style="list-style-type: none"> <li>• Families receive needed services that are timely, appropriate and connected to community resources.</li> <li>• Increase the % of children in Maine who have access to a Medical Home</li> <li>• State and communities have a plan of action that can be built upon for continuous improvement based upon input and data from children and families</li> </ul>



GOALS/ OBJECTIVES	INPUTS (Resources & Assets) People, programs, policies and funds that exist in one or more “Homes”	OUTPUTS/ACTIVITIES To achieve the Goals/ Objectives given the resources and assets in one or more of the four “Homes”	OUTCOMES and INDICATORS
<p align="center"><b>III. Balance Cognitive Development with the Emotional and Physical Needs of Young Children</b></p> <p>A. To ensure that all children have relationships and environments that nurture healthy and consistent social, emotional, physical, and cognitive development. Promote ALL children’s healthy attachments</p> <p>B. To ensure that all families, early childhood programs, and schools have the knowledge and understanding to foster and promote healthy attachments and social emotional development for all children</p> <p>C. To ensure that all parents and caregivers have necessary skills to provide all young children with daily literacy experiences</p>	<p><b>Family Home</b></p> <ul style="list-style-type: none"> <li>• Parent(s), Significant Others, Extended Family</li> </ul> <p><b>Educational/Child Care Home</b></p> <ul style="list-style-type: none"> <li>• Home Visiting</li> <li>• Early Head Start</li> <li>• Early Start CDA</li> <li>• Libraries</li> <li>• Success by Six</li> <li>• Healthy Learners</li> <li>• Healthy Child Care America</li> </ul> <p><b>Medical/ Health Care Home</b></p> <ul style="list-style-type: none"> <li>• Medical Homes/MH/ Public Health Nursing</li> <li>• One ME Substance Abuse Prevention</li> <li>• Children with Special Health Needs Program</li> </ul> <p><b>Community Home</b></p> <ul style="list-style-type: none"> <li>• DHS/ BDS</li> <li>• DOE, Higher Education, Personnel Prep (tech/community &amp; state colleges)</li> <li>• Maine Roads to Quality</li> <li>• Maine Parent Federation</li> <li>• ME Assoc. Infant Mental Health</li> <li>• Center for Community Inclusion</li> <li>• Child Abuse Councils</li> <li>• Task Force Parent Handbook</li> <li>• Maine Early Childhood Results</li> <li>• Raising Readers</li> <li>• Maine Humanities Council’s Born to Read</li> <li>• WIC</li> <li>• Maine Center of Public Health</li> <li>• Communities for Children and Youth</li> </ul>	<ul style="list-style-type: none"> <li>• Strengthen mental health component of home visiting system</li> <li>• Expand home visiting to pregnant women beyond first births</li> <li>• Statewide media campaign reflecting research on emotional intelligence</li> <li>• Integrate training on balancing emotional, social, cognitive development</li> <li>• Identify existing family resources</li> <li>• Identify all infant toddler training programs &amp; curricula</li> <li>• Identify early childhood special ed programs &amp; training opportunities</li> <li>• Disseminate Parent handbook</li> <li>• Strengthen literacy component of Home Visiting</li> <li>• Early literacy training of childcare providers and pre school- teachers</li> <li>• Involve families in all planning processes.</li> <li>• Maine Center of Public Health Grant to strengthen capacity of primary health care providers to detect mental health problems</li> </ul>	<ul style="list-style-type: none"> <li>• All children birth to three will demonstrate healthy, secure attachment to caregivers</li> <li>• Reduce rates of low birth weight and premature births</li> <li>• Reduce tobacco and alcohol use by 15% for Maine’s future parents</li> <li>• Decrease reported children’s mental health dysfunction: anti-social and aggressive behaviors, etc</li> <li>• Resources will be readily accessible to families: culturally sensitive written material; web resources; parent handbook disseminated to all first-time families prior to birth</li> <li>• Training and conferences for providers and families on social development are widely offered</li> <li>• Personnel preparation curricula and methods will promote healthy social &amp; emotional development that is in line with Neurons to Neighborhood research</li> <li>• Increase school-readiness</li> <li>• Increase literacy skills Pre-K</li> <li>• Reduce number of children in special education</li> </ul>

GOALS/ OBJECTIVES	INPUTS (Resources & Assets) People, programs, policies and funds that exist in one or more “Homes”	OUTPUTS/ACTIVITIES To achieve the Goals/ Objectives given the resources and assets in one or more of the four “Homes”	OUTCOMES and INDICATORS
<p align="center"><b>IV. Guaranteeing Effective Service Systems for Young Children</b></p> <p>A. All systems (or units of government) will coordinate and collaborate to benefit children and families, developing and enacting an effective system that supports and nurtures all children and families throughout childhood</p> <p>B. Effective service systems and interventions for young children will have families at the center and accessible to all</p> <p>C. Shared accountability for shared goals with unified measures</p>			
	<p><b>Family Home</b></p> <ul style="list-style-type: none"> <li>• Parents, Significant Others</li> <li>• Extended Family</li> </ul> <p><b>Educational/Child Care Home</b></p> <ul style="list-style-type: none"> <li>• Development of statewide system for home visiting</li> </ul> <p><b>Medical/Health Care Home</b></p> <ul style="list-style-type: none"> <li>• Bureau of Health</li> <li>• Primary Care Providers</li> </ul> <p><b>Community Home</b></p> <ul style="list-style-type: none"> <li>• Local Branches of state systems</li> <li>• Engaged families</li> <li>• Governor</li> <li>• Early Childhood Task Force</li> <li>• Children’s Cabinet</li> <li>• Communities for Children and Youth</li> <li>• Regional Children’s Cabinets</li> <li>• Tri-branch Council on Children and Families</li> <li>• Office of Policy and Legal Analysis</li> </ul>	<ul style="list-style-type: none"> <li>• Reauthorize the enabling legislation for the Early Childhood Task Force</li> <li>• Support the Governor and First Lady to take a leading role in the development of a more collaborative service system, including leadership of the Early Childhood Task Force and Children’s Cabinet/Council on Children and Families (CC/CCF)</li> <li>• Create common vision/goals under direction of the CC/CCF that are shared with and by all levels of the system (state, region, local contracting agencies)</li> <li>• Define common competencies, standards and certifications for the care and support of young children and families</li> <li>• Develop training at the university, state and local levels that supports the development of common competencies and cross-disciplinary and relational practices</li> <li>• Define, monitor and enforce collaborative behaviors through Cabinet leadership, inclusion in agency job descriptions and contracts with outside agencies</li> <li>• Increase the amount available for pooled, flexible funding</li> <li>• Seek grants for non-categorical, collaborative, cross-agency funding;</li> <li>• Increase awareness of the CC/CCF and dialogue with all stakeholders</li> <li>• Needs assessments will be done to identify unmet needs</li> <li>• Waiting lists resulting from court orders will be targeted for elimination</li> <li>• Early Childhood Task Force will identify “effective” or “best practices” systems</li> <li>• In the Home Visiting programs, staff will help parents and family members with such life skills as to quit smoking, continue education, move to improved housing,</li> <li>• Develop unified performance measures across department for shared goals</li> <li>• Develop integrated information systems across departments</li> <li>• Review long-term cost and benefits and unintended and intended consequences on children and families of policies that impact children and families</li> <li>• Develop impact statements</li> </ul>	<ul style="list-style-type: none"> <li>• Timely access to services by fewer personnel and more comprehensive services</li> <li>• All parts of the state and all agencies use Integrated Case Management, and other best practices, effectively</li> <li>• Families feel supported by the system</li> <li>• Children and families with needs will have easy access to service systems to meet these needs</li> <li>• Parent’s abilities as the prime mover in a child’s life will be given increased visibility</li> <li>• Improved services and less time spent on reporting multiple measures for shared goals</li> <li>• Successful piloting of integrated case management</li> <li>• Pooled flexible funding</li> <li>• Departments are all using performance based contracting</li> <li>• Data systems development grant at Office of Child Care and Head Start</li> <li>• Comprehensive data available for policy development</li> <li>• Policies that negatively impact families and children will be avoided and changed</li> <li>• Services not employing best practices will be assisted by the Early Childhood Task Force</li> <li>• In programs/services employing “team planning” for a child, the parents will be a lead member</li> </ul>

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